## STATEMENT OF FACTS - HOMELESS ASSISTANCE

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## **Important Information**

If you have no place to stay, have \$100 or less in resources and appear eligible for CalWORKs, you may be able to get Homeless Assistance payments for temporary shelter and permanent housing **once in a lifetime**, unless your homelessness is due to an exception. You must be seeking permanent housing (PH). While you are looking you may get money for temporary shelter (TS). If you find someplace to live, you may get money for permanent housing (PH). Exceptions to the once-in-a-lifetime rule are homelessness due to: domestic violence, physical or mental illness, or uninhabitability of the home. These exceptions are limited to once every 12 months. Homelessness that is directly caused by a State or Federal declared natural disaster is also an exception.

You may get temporary shelter (TS) payments for up to 16 days in a row. The first day starts when you get the first temporary shelter payment. If you stay anywhere for free, or somewhere other than a shelter or business which rents rooms, you can't get a TS payment, but the days count as part of the 16 days.

To get TS payments you must rent from a person or place that is in the business of renting property.

- At the end of the 16 days, TS will stop. You will never be able to get TS again, unless you have an exception, even if you have not used up all the TS benefits.
- You will be asked to prove that your payments were spent on shelter. If you can't, future payments will go to a shelter landlord or others for you.

instructions: Print all answers in link. If you need nelp, ask your worker.								COUNTY USE ONLY					
1.	. Name of Caretaker Relative (first, middle, last)								RECEI	VED			
2 /	Message Phone	А	Social Security Number	В	Da <sup>a</sup>	e of Birth	Yr	С	СО	Aid Code	Case Number	AU	
2.7	A. What was your last address?						Zin		Casa	Namo (	(Last Eirst)		
Number, Street City State Zip									D Case Name (Last, First)  L Date HA Authorized				
B. Explain where you are staying now.							E	Mo	Day Yr				
								F	Туре	of HA (	· —		
C. How long have you been there?										Tem <sub>l</sub>	porary $\square$ Per $\square$ PV	manent	
	D. Do you pay for staying there?  If "YES," how much?						YES NO			TM TU	☐ PM ☐ PU		
3.	Explain why you have no place to live.								Start Date: Start Date:				
4	Are you seeking permanent housing?							1	Disposition:				
٦.	Explain:						YES NO		Shelter arranged prior to TS  Vendor payment issued				
5.	Do you get Cash Aid?  If "YES," in which county:						YES NO	HA denied					
6.	Did you get Homeless Assistance	e from	any county at any time?				YES NO						
	If "YES," complete:						YES   NO						
_	Which county:		When:					ł					
7.	List all liquid resources you own (include cash, checks, savings or checking accounts, credit union accounts, etc.). List each item and give its value.								Worker:  Total resource value:				
8.	If you get Homeless Assistance, you may have the payment made out to you or given directly to a shelter, landlord or other for you. Check (🗸) below to tell us how you want the payment made:												
	☐ To Yourself ☐ To a L	andlo	rd To a Shel	ter		Otl	her (explain):						

## I understand that:

- Homeless Assistance Temporary Shelter (TS) and Permanent Housing (PH) payments are limited to once in a lifetime, unless I have a verified exception.
- There is a limit on how much Homeless Assistance I can get.
- I am required to give my Social Security Number, which will be used to check identity and verify that I am not getting aid in more than one case, one county, or one state.

## I understand that I must provide proof that:

- I am homeless;
- I am homeless due to an exception, if I have already gotten homeless assistance.
- I used the TS payment for housing, and that if I cannot, I must have my homeless assistance payments made out or given to a shelter, landlord or to others for me.

DATE

I declare under penalty of perjury under the laws of the United States of America and the State of California that the information contained on

this Statement of Facts - Homeless Assistance is true and correct.

**CERTIFICATION** 

SIGNATURE OF CARETAKER RELATIVE